

State of Tennessee



Department of State
Corporate Filings

312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, TN 37243

For Office Use Only

**APPLICATION FOR RESERVATION OF
LIMITED LIABILITY COMPANY NAME**

To the Tennessee Secretary of State:

Pursuant to §48-207-102 of the Tennessee Limited Liability Company Act or §48-249-107 of the Tennessee Revised Limited Liability Company Act, the undersigned hereby applies for reservation of the following name for a period of four (4) months:

The name and address of the applicant is:

Date: _____

(if applicant is a business)

(Name of Business)

By: _____
(Signature)

Name (typed or printed)

Signer's Capacity

(if applicant is an individual)

Applicant's Signature

Applicant's Name (typed or printed)